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| FEE TRANSMITTAL for FY 2005 <small>Patent fees are subject to annual revision.</small> | | Complete if Known | |
|--|--|----------------------|---------------|
| <input type="checkbox"/> Application claims small entity status. See 37 CFR 1.27 | | Application Number | 10/016,850 |
| TOTAL AMOUNT OF PAYMENT (\$) | | Filing Date | 12/14/2001 |
| 790 | | First Named Inventor | Hughes |
| | | Examiner Name | Spivack, P.G. |
| | | Art Unit | 1614 |
| | | Attorney Docket No. | D-3004 |

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number 01-0885 Deposit Account Name Carlos A. Fisher

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) associated with this communication ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

| Application Type | FILING FEES | | SEARCH FEES | | EXAMINATION FEES | | Fees Paid (\$) |
|------------------|-------------|-----------------------|-------------|-----------------------|------------------|-----------------------|----------------|
| | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | Fee (\$) | Small Entity Fee (\$) | |
| Utility | 300 | 150 | 500 | 250 | 200 | 100 | |
| Design | 200 | 100 | 100 | 50 | 130 | 65 | |
| Plant | 200 | 100 | 300 | 150 | 160 | 80 | |
| Reissue | 300 | 150 | 500 | 250 | 600 | 300 | |
| Provisional | 200 | 100 | 0 | 0 | 0 | 0 | |
| Subtotal (1) | | | | | | | 0 |

2. EXCESS CLAIM FEES

| Fee Description | Small Entity Fee (\$) | Fee Paid (\$) |
|---|-----------------------|---------------|
| Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent | 50 | 25 |
| Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent | 200 | 100 |
| Multiple Dependent Claims | 360 | 180 |
| Total Claims | | |
| Extra Claims | | |
| Fee (\$) | | |
| Fee Paid (\$) | | |
| HP = highest number of total claims paid for, if greater than 20 | | |
| Indep. Claims | | |
| Extra Claims | | |
| Fee (\$) | | |
| Fee Paid (\$) | | |
| HP = highest number of independent claims paid for, if greater than 3 | | |
| Subtotal (2) | | 0 |

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(e).

| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) |
|--------------|--------------|--|----------|---------------|
| -100 = | /50 = | (round up to a whole number) | x | = |
| Subtotal (3) | | | | 0 |

4. OTHER FEE(S)

☐ Surcharge - Late filing fee or oath/declaration: \$130 fee (\$65 small entity discount)

☐ Non-English Specification: \$130 fee (no small entity discount)

☐ 1-month extension of time: \$120 fee (\$60 small entity discount)

☐ 2-month extension of time: \$450 fee (\$225 small entity discount)

☐ 3-month extension of time: \$1020 fee (\$510 small entity discount)

☐ 4-month extension of time: \$1590 fee (\$795 small entity discount)

☐ 5-month extension of time: \$2160 fee (\$1080 small entity discount)

☐ Information Disclosure Statement Fee: \$180 fee (no small entity discount)

☐ Notice of Appeal: \$500 fee (\$250 small entity discount)

☐ Filing a Brief in Support of Appeal: \$500 fee (\$250 small entity discount)

☐ Request for Oral Hearing: \$1000 fee (\$500 small entity discount)

☐ Utility Issue Fee: \$1400 fee (\$700 small entity discount)

☐ Recording each patent assignment per property (times number of properties): \$40 fee (no small entity fee discount)

☒ Request for Continued Examination: \$790 fee (\$395 small entity discount)

☐ Other: _____

Subtotal (4) 790

SUBMITTED BY

| Name (Print/Type) | Registration No. (Attorney/Agent) | Telephone |
|-------------------|-----------------------------------|--------------|
| Carlos A. Fisher | 36,510 | 949-450-1750 |
| Signature | Date 12/28/05 | |